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RE: Payment of Issue Fee for U.S. Patent Application No. 10/617,309 to Mingyan Liu

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TRANSMITTAL	Filing Date	10/617,309			
FORM	First Named Inventor	July 10, 2003			
1 Oktin	Art Unit	Mingyen ⊔u 3738			
	Examiner Name				
(to be used for all correspondence after Initial filing) Attorney Docket Number		Thomas C. Barrett			
Total Number of Pages in This Submission 2 Attorney Docket Number MSDI-201/PC273.19					
ENCLOSURES (Check all that apply)					
Fee Transmittal Form	Orawing(s)		After	Allowance Communication to TC	
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Date July 26, 2006	I F	teg. No.	- 404		
1, 5, 2000		44	5,431		
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE addressed to or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. KRIEG DEVAULT LLP ONE INDIANA SQUARE, SUITE 2800 INDIANAPOLIS, IN 46204-2709 heDer (Depositor's name) (Signature) (Date) APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/617,309 07/10/2003 Mingyan Liu 4002-3300 3586 TITLE OF INVENTION: SPINAL IMPLANT AND CUTTING TOOL PREPARATION ACCESSORY FOR MOUNTING THE IMPLANT APPLN. TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$0 \$0 20 07/27/2006 EXAMINER ART UNIT CLASS-SUBCLASS BARRETT, THOMAS C 3738 606-079000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) SDGI Holdings, Inc. Wilminaton, DE Please check the appropriate assignce category or categorics (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): ☐ Issue Fee A check in the amount of the fee(s) is enclosed. Dublication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-2424 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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